3-24-09

Attorney Docket Number

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PTO/SB/21 (01-08) Approved for use through 05/31/2008. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE ellection of information unless it displays a valid OMB control number. Paperwork Reduction Act of 1995, no persons are required to respond to a co Application Number 10/814726 Filing Date TRANSMITTAL 03-31-2004 **FORM** First Named Inventor **LIPSON** Art Unit **Examiner Name** ZIA (to be used for all correspondence after initial filing)

Tot	al Number of Pages in This Submission	27	Attorney Docket Number	4023-0	001				
ENGLOSUPES 101 1 11 1									
ENCLOSURES (Check all that apply)									
V	Fee Transmittal Form		Drawing(s)		After Allowance Communication to TC				
	Fee Attached	🗀 '	Licensing-related Papers	•	Appeal Communication to Board of Appeals and Interferences				
	Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement		Petition Petition to Convert to a Provisional Application Power of Attorney, Revocati Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on C	Address	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):				
	Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remai	of Drawings						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm Name (Friangle Patents, PLLC)									
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Date 93-23-2009			Reg. No.	42,585					
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Office Action Response w/3rd ext fees & drawings serial no. 10/814726

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PTO/SB/17 (10-08)

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Effective on 12/08/2004. Complete if Known pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/814726 **Application Number FEE TRANSMITTAL** Filing Date 03-31-2004 For FY 2009 LIPSON First Named Inventor **Examiner Name** ZIA Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2131

TOTAL AMOUNT OF PAY	MENI (\$)	555.00		Attorney Docke	t No. 402	23-001		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
FEE CALCULATION			•	· · · · · · · · · · · · · · · · · · ·				
BASIC FILING, SEAF Application Type	FILING F			CH FEES Small Entity Fee (\$)		TION FEES	Fees Paid (\$)	
Utility	330	165	540	270	220	<u>Fee (\$)</u> 110	<u> </u>	
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	. 0	0	0		
2. EXCESS CLAIM FEI Fee Description Each claim over 20 (Each independent cla Multiple dependent c Total Claims	including Re iim over 3 (i	ncluding Reiss		Paid (\$)		Fee (\$) 52 220 390	Small Entity Fee (\$) 26 110 195 ependent Claims	
			=	aid (ψ)		Fee (\$)	Fee Paid (\$)	
HP = highest number of tota Indep. Claims 3 or HP = HP = highest number of inde	l claims paid for Extra Claim	, if greater than 20. <u>s Fee (\$)</u> _ x	<u>Fee F</u>	Paid (\$)				
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof (round up to a whole number) x Fee (\$) Fee Paid (\$)								
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							Fees Paid (\$)	
Other (e.g., late filin	g surcharge)	: Office Action	n respons	e w/3rd montl	n extension		555.00	
SUBMITTED BY	1/2							

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SUBMITTED BY		/ /	\dr		
Signature	T	1	1	Registration No. (Attorney/Agent) 42,585	Telephone 919-268-4236
Name (Print/Type)	JiNa	iln K	LASGOW		Date 03-23-2009

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